

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>TH</i>		<i>11-29-01</i>
O.I.P.E. CLASSIFIER		<i>10</i>	<i>11-29-01</i>
FORMALITY REVIEW	<i>CTH</i>	<i>744</i>	<i>11-29-01</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final Original	
1	5 8
2	7 15
3	02 02
4	0 1
5	0 1
6	0 1
7	0 1
8	0 1
9	0 1
10	0 1
11	0 1
12	0 1
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45	0 1
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49	0 1
50	0 1

Claim	Date
Final Original	
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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